

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 22, 2007 08:00 AM
Secretary of State**

DOCUMENT # N98000002198

1. Entity Name
CROSSPOINT BAPTIST FELLOWSHIP, INC.



Principal Place of Business
**920 COURTNEY ROAD
PERRY, FL 32347**

Mailing Address
**920 COURTNEY ROAD
PERRY, FL 32347**



01172007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3509204	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HUMPHRIES, BUDDY
5105 ROPING LANE
PERRY, FL 32347**

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Wayne D. Humphries
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/17/06
DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	CARLTON, CHRIS
STREET ADDRESS	3518 CARLTON RD
CITY-ST-ZIP	PERRY, FL 32348
TITLE	D
NAME	HUMPHRIES, BUDDY
STREET ADDRESS	5105 ROPING LANE
CITY-ST-ZIP	PERRY, FL 32347
TITLE	D
NAME	DRAWDY, SAM
STREET ADDRESS	506 JUDSON DR
CITY-ST-ZIP	PERRY, FL 32347
TITLE	D
NAME	SWINDLE, JAY
STREET ADDRESS	1421 ANDREW REAMS RD
CITY-ST-ZIP	PERRY, FL 32347
TITLE	S
NAME	HAMBY, FRANCES
STREET ADDRESS	1421 ANDREW REAMS RD.
CITY-ST-ZIP	PERRY, FL 32347
TITLE	D
NAME	BODIFORD, TROY
STREET ADDRESS	1880 KELLY GRADE
CITY-ST-ZIP	PERRY, FL 32348

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01/23/07-80025-005 61.25
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wayne D. Humphries 1/17/06 850 584 5441
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #